Under the Paperwork Reduction	on Act of 1995	no persons are required	to res	pond to a collection	or informati	on unless	it displays a	valid ON	AB control number	
Effects	101	Complete if Known								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number 10/574,9		/574,907				
FEE TRANSMITTAL			-	Filing Date	ate April 25, 2007					
For FY 2009				First Named Inventor Toru N		ru NISHI	SHIMURA			
C 27 OFD 4 27				Examiner Name Y.QIAN						
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1793						
TOTAL AMOUNT OF PAYMENT (\$) 1,170.00				Attorney Docket	No. 04:	0425-1253PUS1				
METHOD OF PAYMEN	Γ (check al	l that apply)								
Check Credit C	Card [Money Order	None	Other (p	lease identi	fy):				
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name:										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
Çharge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments										
under 37 CFF WARNING: Information on this information and authorization	form may be	ecome public. Credit car	rd info	rmation should no	ot be includ	ed on thi	s form. Prov	ride cred	lit card	
FEE CALCULATION	OII F 10-2030									
1. BASIC FILING, SEAF	RCH, AND	EXAMINATION FEI	ES							
FILING FEES SEARCH FEES EXAMINAT										
Application Type	Fee (\$)	S <u>mall Entity</u> Fe <u>e (\$) </u>	ee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Fee		Fees	s Paid (\$)	
Utility	330		40	270	220	110			0.00	
Design	220	110 1	.00	50	140			0.00		
Plant	220		30	165	170	8:	5	0.00		
Reissue	330		640	270	650	32:		0.00		
Provisional	220	110	0	0	0		0	0.00		
2. EXCESS CLAIM FEES Sm									ntity	
Fee Description Each claim over 20 (including Reissues)							Fee (\$) Fee (\$) 52 26			
Each independent claim over 3 (including Reissues)							220 110			
Multiple dependent claims							390 195			
Total Claims							Multiple Dependent Claims			
17 - 20 or HP = x = 0.00 HP = highest number of total claims paid for, if greater than 20.					Fee (\$) Fee Paid (\$					
Indep. Claims	ciaims paid to Extra Claii	•	Fee I	Paid (\$)		_			0.00	
2 - 3 or HP =		x= .		0.00						
HP = highest number of inde		s paid for, if greater than 3	3.							
3. APPLICATION SIZE If the specification and	FEE drawings :	exceed 100 sheets o	f pap	er (excluding e	lectronic	ally file	d sequenc	e or co	mputer	
listings under 37 Cl	FR 1.52(e)), the application siz	ze fee	due is \$270 (\$	135 for s	mall en	tity) for ea	ach add	litional 50	
	ereof. See	35 U.S.C. 41(a)(1)	(G) a	nd 37 CFR 1.1	6(s).	_				
<u>Total Sheets</u> - 100 =	Extra She	ets <u>Number of</u>	<u>f each</u>	<u>additional 50 o</u> (round up to a v	<u>r fraction</u>		Fee (\$	1 = .	0.00	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									Fees Paid (\$) 0.00	
Other (e.g., late filling surcharge): 2nd Month EOT (\$360.00 (1st Month paid)); RCE (\$810.00) 1,170.00										
SUBMITTED BY	1	_								
gnature Registration No. 32881							Telephone 703-205-8000			
Name (Print/Type) John W. E	Bailey			V ····			Date n	PT 0	o 2000	
This collection of information is re		CED 1 126. The information	on ie ro	quired to obtain or	retain a hen	efit by the	public which	U 1 4	0 2000	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.